

## AGENCY COORDINATOR FORM

The individual named below is designated as the Agency Coordinator for the 2016 Performance Recognition Program:

Agency: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you will be serving as the coordinator for multiple agencies, please list other agencies:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_  
Signature of Agency Head or Designee

\_\_\_\_\_  
Date

**Return this form by February 22, 2016 to [Nancy.W.Daiute@hrd.state.ma.us](mailto:Nancy.W.Daiute@hrd.state.ma.us)**

There will be a *Coordinator Meeting* on *February 25<sup>th</sup> at 11:00 a.m. in Room 211 at One Ashburton Place*. We'd like to see you there!

If you have any questions regarding the Performance Recognition Program or your role as the Agency Coordinator, please contact Nancy Daiute at 617.878.9729.

THANK YOU!